

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		2				
4		0				
5		0				
6		0				
7		0				
8						
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42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	1					
TOTAL DEP.	1					
TOTAL CLAIMS	8					

*		*		*	
IND.	DEP.	IND.	DEP.	IND.	DEP.
51					
52					
53					
54					
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94					
95					
96					
97					
98					
99					
100					
TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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